

# Fort Worth Museum of Science and History      Museum School Fall/Spring 2020-2021 **SCHOLARSHIP APPLICATION**

The Museum School Scholarship Program offers economic assistance to families in order that their children may experience an educational and exciting Museum School class. Funding for the scholarship program is made possible by generous contributions from individuals whose goal is to help all children gain the life-long benefits Museum School has to offer. Each year, Museum School has a limited number of scholarships – awarded on financial need – that are allotted on a first-come basis until all funds for the fall/spring program are distributed. Scholarship awards are for one class per child.

**Museum School Fall/Spring 2020-2021 scholarship awards are for tuition only – up to \$750.** Scholarship recipients pay the \$75 non-refundable registration fee, which should be submitted with the registration form, scholarship application and proof of public assistance or income documentation. If the preferred class listed on the registration form is not available and a second choice of class is not indicated, your child will be placed on the waiting list and you will not pay the \$75 registration fee.

**A scholarship award may be used for any Fall/Spring 2020-2021 preschool class, however any tuition difference over the awarded amount must be paid by the recipient.** This tuition difference may be paid using the installment plan with the use of a credit card. Scholarship recipients for the upcoming Fall/Spring 2020-2021 school year are not eligible for a Summer 2020 Museum School scholarship.

## **HOW TO RETURN YOUR CHILD'S REGISTRATION FORM, REGISTRATION FEE, SCHOLARSHIP APPLICATION AND INCOME DOCUMENTATION**

### Pay the \$75 registration fee with a credit card:

Return your child's completed registration form, the scholarship application and a copy of your public assistance paperwork or income documentation (see "What to include with the application" section below). Write "applying for a scholarship" on the payment portion of the registration form and include a credit card number for the \$75 non-refundable registration fee. Email the scanned registration form, scholarship application and a copy of your public assistance paperwork or income documentation to [registermuschool@fwmsch.org](mailto:registermuschool@fwmsch.org). No photos of paperwork, please.

### Pay the \$75 registration fee by check:

Bring or mail the registration form, check, the scholarship application and a copy of your public assistance paperwork or income documentation (see "What to include with the application" section below) to the Museum School office during business hours, Monday-Friday, 9 am-4 pm. Write "applying for a scholarship" on the payment portion of the registration form. You may also mail your paperwork to Museum School, 1600 Gendy Street, Fort Worth, TX 76107.

### **Do you qualify?**

**Eligibility for Museum School scholarships is based upon the June 1, 2019-June 30, 2020 income guidelines used by Texas WIC (Special Supplemental Nutrition Program for Women, Infants and Children.)**

#### If you are currently receiving public assistance –

Applicants who are currently enrolled in an official public assistance program (Medicaid, TANF, SNAP, Texas WIC, Medicaid, SSI, Food Stamps) automatically qualify for a Museum School scholarship. Scholarships are based on fund and class availability and do not guarantee a place in a class.

#### If you are not receiving public assistance –

Applicants who are not receiving public assistance but whose income meets the eligibility guidelines of Texas WIC may be eligible for a full or partial Museum School tuition scholarship. Awards are based on financial need and available funds.

### **What to include with the application**

#### If you are already receiving 2019/20 public assistance –

Include a copy of current enrollment in a public assistance program (Medicaid, TANF, SNAP or Texas WIC) with the scholarship application and registration form.

#### If you are not receiving public assistance –

Include a copy of your 2019 tax return OR copies of the last two paycheck stubs of each parent that works, along with the scholarship application and registration form.

Paycheck stubs must show the gross monthly pay which is the amount before taxes and deductions. If you get paid weekly, include 4 weekly paycheck stubs; if you get paid twice a month, include 2 monthly paycheck stubs; and if you get paid once a month, include 1 monthly paycheck stub. A brief statement of why you are requesting tuition assistance is helpful in determining an award.

All applicants will be notified of scholarship status along with the registration confirmation. Applications received with incomplete income paperwork or missing the \$75 registration fee cannot be considered for a scholarship.

Class placement is on a first-come basis. A scholarship award does not guarantee a place in the class desired. Scholarship recipients must register according to the procedures outlined in the current Museum School brochure. A Museum School scholarship has no cash value. Unused scholarship tuition may not be carried over to any other Museum School sessions or classes, nor may it be used for a sibling or another child.

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**SCHOLARSHIP APPLICATION**

**STUDENT INFORMATION** Please list all children applying for a scholarship. (Scholarships are for one class per child.)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_ ( ) F ( ) M

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_ ( ) F ( ) M

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_ ( ) F ( ) M

**PARENT INFORMATION**

**Parent / Guardian #1** (circle one) Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ ( ) Home ( ) Cell (please check one)

Email \_\_\_\_\_ Employer \_\_\_\_\_

**Parent / Guardian #2** (circle one) Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ ( ) Home ( ) Cell (please check one)

Email \_\_\_\_\_ Employer \_\_\_\_\_

**INCOME INFORMATION**

**Do you currently receive public assistance?** ( ) No ( ) Yes If yes, what type? \_\_\_\_\_

Send copies of your current public assistance enrollment with dates (Medicaid, TANF, SNAP, Texas WIC, etc.)

**If you are not on public assistance** – You must send proof of income – copies of either your 2019 tax return OR paychecks that show a gross monthly amount.

What is the total number of children living in the household? \_\_\_\_\_ Total number of adults living in the household? \_\_\_\_\_

What is your monthly gross income? (Before taxes and deductions) Parent / Guardian #1 \$ \_\_\_\_\_ Parent / Guardian #2 \$ \_\_\_\_\_

Do you receive any other household income? ( ) No ( ) Yes What kind? \_\_\_\_\_

Monthly Gross Income from this source \$ \_\_\_\_\_ (child / spousal support, unemployment, pension, student grants, etc.)

**Please give us additional information concerning your financial situation that will assist with the scholarship decision.**

Use the back of this page if needed.

The information I have provided is correct. I understand that all information is kept strictly confidential and has been requested for the sole purpose of establishing financial need. I have read and understand the requirements regarding scholarship awards and have attached the required income documentation.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE** DATE RECEIVED \_\_\_\_\_ STATUS \_\_\_\_\_ NOTES: \_\_\_\_\_